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CONFIRMATION NO. 1534

<b>SERIAL NUMBER</b> 10/564,620	<b>FILING OR 371(c) DATE</b> 01/13/2006 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1623	<b>ATTORNEY DOCKET NO.</b> FISHMAN18A
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/IL05/01166 11/08/2005 which claims benefit of 60/625,564 11/08/2004

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***

\*\* 11/20/2007

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 10	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>M.C.H.</u> Initials <u>M.C.H.</u>				

**ADDRESS**

1444

**TITLE**

Therapeutic Treatment of Accelerated Bone Resorption

<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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